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Spain and the antipsychiatric aesthetic

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This article outlines a family resemblance in the work of authors and film-makers of the 1960s and 1970s in Spain. In the light of the international zeitgeist most often termed “antipsychiatry”, the works of Michel Foucault (1926 – 1984) and R. D. Laing (1927 – 1989) make up the critical focus for the formulation of an “antipsychiatric aesthetic” in Spanish literature. In the novels *Tiempo de silencio* (1961) by Luís Martín-Santos (1926 – 1964) and *Volverás a Región* (1967) by Juan Benet (1927 – 1993), and the film *El espíritu de la colmena* (1973) directed by Víctor Erice (1940 -), this antipsychiatric aesthetic explores the relationship between doctor and patient in poetry as Scottish antipsychiatrist R. D. Laing had in practice. Contemporary to Foucault and Laing’s critique of the managerial doctor figure, these three texts re-enact this critique and extend its remit to embody the reader-writer/ author-text/ text-reader dialectic. Consequently, a specifically Iberian school of critical theory becomes apparent, that responds to the existential writings of Miguel de Unamuno (1864 – 1936). Embedded within these poetics are attempts to reframe the ontological anxieties that stem from a subjective experience of silence and control.

Keywords: antipsychiatry; R. D. Laing; silence; control; Michel Foucault; Juan Benet; Luis Martín-Santos; Víctor Erice; theory; poetry; authority

1. Antipsychiatry

By the beginning of the 1960s, the treatment of people whom society diagnosed as mentally ill became a focus of international importance. Published in 1961, Michel Foucault’s *Folie et déraison: Histoire de la folie à l’âge classique* gave a damning reading of the history of the asylum, and questioned certain aspects of the subsequent development of psychiatric practice (Rabinow 1984, 165). In 1964, a shortened edition was translated as *Madness and Civilization: A History of Insanity in the Age of Reason* by American translator Richard Howard. This was published in Britain in 1967 in a series edited by Scottish psychiatrist R. D. Laing and his colleague David Cooper. Some crucial but indefinite quality seems to get lost in the semantic shift from *déraison* to *madness*, but Foucault found the failure of dialogue between reason and unreason troubling. Modern psychiatric practice, as exemplified by Sigmund Freud, was still dominated by the presence of “medical personage[s]” who practiced “absolute Observation, a pure and circumspect silence” (Rabinow 1984, 165). What Foucault saw as a continued mastery over subjects defined as

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mad exhibited the dangerous, intoxicating value of control. Certainly, early practitioners like Freud grappled with the concept of psychosis. The Freudian psychotic subject shrank from “the unbearable idea” (Freud 1909, 130) of reality, operating what the psychoanalyst – in his paper *The Defense Neuro-Psychoses* – describes as a mechanism of defence. Theoretically at least, Freudian psychotic subjects were relegated to silence and drifted in fragments or whole out of reality; yet they were controlled in reality, according to Foucault, with treatment that “punishes and rewards” (Rabinow 1984, 165). Treatment as such was akin to silence. Foucault was concerned that such defensive classification delineated the mind’s perceived limits rather than its potential; and worse, that these delineations were the product of “persuasion and mystification” (Rabinow 1984, 164). Appearing unspoken-for in the process of psychiatry, something like Freud’s own theory of psychosis characterised the way psychiatry itself behaved. My reading rests on the sense that what remains compelling in both Foucault and Freud is an anxiety about the inclination to draw such boundaries. What Foucault felt that the psychoanalyst did not, perhaps, was the insidious potential of this anxiety; anxiety that could be quelled through acts of safety. Safety was still, as it had been in Bedlam, a question of locking away. The illogical outward coil that these theories produced, indeed, was the victim of its own spiral into denial. Later Jacques Lacan, too, was caught in this glare. Psychosis would be met by foreclosure.

Laing, as Foucault’s early champion in Great Britain, had published *The Divided Self: An Existential Study in Sanity and Madness* in 1960. Laing’s book contained a series of case studies of schizophrenic patients who Laing defined as not “sane by common consent”; they did, however, retain an “insistent experience of other dimensions” (1960, 11). Laing linked this sense of common consent negatively with the discipline of psychiatry – a discipline controlled by consent-giving masters as Foucault defined them. Laing felt the psychiatric dimensions of schizophrenic, “mad”, patients took ontology beyond “our present pervasive madness that we call normality, sanity, freedom” (1960, 11). He envisaged patterns of thought beyond those described by Freud. Laing’s book *Knots* (1970) was, indeed, a collection of poetry of frenzied and knotted reason. This visualisation of the imprisonment of the mind within rational thought was a powerful one, and the philosophy that Foucault espoused became something practical and controversial in the hands of Laing and Cooper. By 1967, they were advocating a fully-fledged sceptical psychiatric practice in their works from that year: Laing’s *The Politics of Experience*, and Cooper’s *Psychiatry and Anti-Psychiatry*. In the United States psychiatrist Thomas Szasz, sociologists Erving Goffman and Thomas Scheff, and writer Ken Kesey all showed sympathy to those who, in psychosis, had suffered at the hands of psychiatry (Miller 2004, 19). At the same time, as John Foot’s recent monograph on critical psychiatry in Italy informs us, Franco Basaglia was gathering an *équipe* that by 1968 would have begun to dismantle the asylum system in Italy (2014).ⁱ The danger was, however, felt that antipsychiatry meant an outright denial of mental illness, rather than its more humanist aspect as the reconfiguration of what “common consent” might mean. In this latter sense I use antipsychiatry as a useful functional term: it encapsulates an anxiety shared by Spanish texts that speaks of silence and control, those uneasy bedfellows that so tested the psychoanalysts.

In *The Divided Self*, Laing’s understanding of an ontologically insecure patient – one who is not defined by assurances of “consistency or cohesiveness” (1960, 42) – sees Laing

attempt to offer madness (as inconsistent, incohesive) a way to address silence and control. Laing's belief in the importance of observing and listening to his patients came from a problem he recognised with the authority of language and definition: "how can one demonstrate the general human relevance and significance of the patient's condition if the words one has to use are specifically designed to isolate and circumscribe the meaning of the patient's life to a particular clinical entity?" (1960, 18). Laing hoped to free up the patient-doctor duality, and unleash, or uncover, the processes that orthodox psychiatry seemed to suppress. Laingian mental illness was, importantly, an existential angst, and Laing drew on Jean-Paul Sartre in his critique. Language must, according to Laing, be essentially humanist and phenomenological; it need not cleave to the usual conditions of managed rational thought; however, it is tied up in the "interaction of one part of a mental apparatus and another" (1960, 19). By bringing the analyst and patient together into this environment, Laing, Basaglia et alia hoped to diffuse the managerial nature of psychiatry and, certainly in Laing's case, listen to experience shut out from rational ideas of human ontology. This attempt to collapse isolating language was a radical move; it gave antipsychiatry not only a practical sense of change, such as Basaglia affected in Gorizia, but also a sense that ontological insecurity – Foucault's *dérailson* - had something to offer psychiatry. Here Laing took his inspiration from literature, from Kafka and Sartre, for example: "only existential thought has attempted to match the original experience of oneself in a relationship to others in one's world by a term that adequately reflects this totality" (Laing 1960, 19). Franco Basaglia's theoretical stance was influenced by Primo Levi. Laing's, by Sartre and Kafka - but also by Lionel Trilling, William Shakespeare and Samuel Beckett. Antipsychiatry as a phenomenological approach to understanding was taken as much from literature as from science - or, at least, not chained to the notion of science as a regulating force; and indeed, critical of "rational" thought. It moved closer to the anxiety of theory – and madness. At its heart, antipsychiatry listened to the tension between freedom and coercion, and between silence and control. How much Spanish critical thought began to maintain a dialogue with antipsychiatric practices during the latter part of the 1970s in Franco's Spain is still under review.ⁱⁱ My concern for the prevalence of these parallels to Laingian theory in text and film offers, however, a compelling route. The works in this article represent a counterintuitive way to consider theory – a way that is markedly different from the authority particular to discursive texts.

2. Spanish antipsychiatry – el “neoproyecto”

By 1968, Francisco Franco's long dictatorship in Spain was nearing its thirtieth year. In the early years of the dictatorship, Franco's repressive Catholic policies have been directly linked with the practice of psychiatry through the figure of Antonio Vallejo Nágera (1889 – 1960). Vallejo Nágera's nationalist psychiatry was one of eugenics related to heritage (Richards 2004), an adjunct of *franquista* policy. The Spanish state performed psychiatric discipline, “steeped in German militarist-authoritarian and psychiatric thinking” (Richards 2012, 212), which dominated Spanish psychiatric practice up until the 1950s (Castillo del Pino 2007, 116). As Mike Richards suggests, practice was “both socially constructed and

ideological” (2004, 839). Vallejo Nágera was head of Franco’s military psychiatric services in 1936, by 1942 was the first professor of psychiatry in Madrid, and by the early 1950s had become President of the Spanish Association of Neuropsychiatry. Outside Spain, he was honoured in Bonn and the US for his work on psychiatry and war (Richards 2004, 839). His policies as state psychiatrist were instrumental in Spain until his death in 1960, the same year that critical psychiatry began its radical movement through the decade in Europe and the United States. Yet, in this environment (and arguably because of it) Spanish literature became the laboratory for an antipsychiatric aesthetic that, as I have mentioned, has less to do with actual psychiatric practice than it does with certain counterintuitive qualities inherent within that practice; envisaged, instead, as a re-enactment of theory in literary text. The shutting-out of ideas from the *franquista* reality, Spanish texts would suggest, goes deeper than censorship, deeper than physical acts. Shutting-out was, for Laing, a characteristic of our ontologically secure reality, heavily exaggerated in the case of Vallejo Nágera. Vallejo Nágera and Spain were, under these auspices, examples of ontological security gone mad - off-kilter, and consumed by their own authority. The apparition of antipsychiatry in Spanish literature and film of the 1960s allowed writers to consider the ontological failure of this overwhelming subjectivity. It is reflective of Laing’s understanding of a phenomenological relationship between analyst and patient – which we may extend here to writer and reader, or reader and text. In Spain, writers are fixated by the role of the analyst, finding a different way to approach a system that has acted as a Foucaultian *medical personage* and that has punished and rewarded Spain as it saw fit. Through a series of counterpoints, this article will exemplify the process Spanish artists performed, a process which mirrors some of the counterintuitive qualities of critical psychiatric practice. Acting as analysts, not as Vallejo Nágera and the state had, but in the Laingian sense, writers Luis Martín-Santos (1924 – 1964) and Juan Benet (1927 – 1993) observed a national disease; Benet (1967, 153) recognised how “todo el país padecía una enfermedad crónica” but also recognised that madness was not an illness to be cured, mastered or managed. Instead, in a tangential manner to what Basaglia, Laing *et alia* were formulating elsewhere, Spanish literature was finding a way to observe and analyse the psychosis produced by Franco’s Spain.

3. The incapacity of science

This article introduces a family of artists who developed an antipsychiatric aesthetic which echoed the zeitgeist permeating international counterculture in the 1960s. My main focus of analysis will be Juan Benet’s novel *Volverás a Región* (1967) and Luis Martín-Santos’ novel *Tiempo de silencio* (1962); as a contrapuntal example I will reflect on the Víctor Erice film *El espíritu de la colmena* (1973). Just as the practice of antipsychiatry recognised art and drew on its manifestation in the psychiatric, so these two novels and film centred on an aesthetic practice of antipsychiatry, and remained within this domain. All three are notable for their characterisations of doctors and patients, and the exploration of the relationship between these characters. These three aesthetic projects reference a history of Spanish antipsychiatry that has a recognisable background in the philosophy of writer, poet and existential

philosopher Miguel de Unamuno (1864 – 1936). In his writing on Unamuno, C. A. Longhurst returns to the Generation of '98, and what Fernando Morán in 1971 called that generation's preoccupation with "la incapacidad ibérica para la ciencia" (Longhurst 2006, 279). Longhurst's engagement with the link between Martín-Santos, and Unamuno and writer Pío Baroja (1872 – 1956), amongst others, reveals a longer history of Spain as a body in need of treatment, and the recognition of an unnamed illness that the Spanish nation did not have the capacity to treat. There is a sense of anxiety, or even a legacy of anxiety centred around this question of failure – failure to cure, failure to treat – that becomes a presence amongst the *noventayochistas*. For Longhurst, this anxiety is expressed through Martín-Santos' ambiguous feelings towards Unamuno and Baroja. Jo Labanyi (1989), on the other hand, argues that Martín-Santos offers a critical response to the *noventayochistas*, turning to irony and parody in an act of criticism of any hint of a nationalist past. And as Longhurst suggests, the ugly appearance of *franquismo* shadows Labanyi's political reading of Martín-Santos' attitude towards Unamuno and Baroja. Longhurst (2006, 299) reclaims "ideas, alusiones y formas de componer literature" for Martín-Santos from these writers. Both scholars mine this tension to great effect. Neither interrogate the sense that the existentialism lurking in the folds of Spanish literature offered a shared understanding of failure. Renewed attempts to navigate this failure, and to treat Spain's ontological insecurity, were a legacy from the Generation of '98. Both Labanyi and Longhurst indubitably recognise a link over time between Martín-Santos and Unamuno, and this link lies not only in questions of political doubt, or even *homenaje*, but in the mode of analysis that Unamuno as proto-antipsychiatrist presents for Martín-Santos. Under this lens, Fernando Morán's assertion that the Generation of '98 tussled with an "incapacidad ibérica para la ciencia" (Longhurst 2006, 279) offers us a way to read Spain's illness that in fact reveals in the quality of this incapacity. Incapacity – etymologically, the inability to hold in – becomes in Spanish letters a process of spilling outside of rational science that is a good working definition for critical psychiatry. Miguel de Unamuno prefigures Martín-Santos as an existentialist, and as Sartre did for R. D. Laing, so Unamuno offers something beyond science as a means to analyse. In *Del sentimiento trágico de la vida* (1913), Unamuno suggests that "la filosofía se acuesta más a la poesía que no a la ciencia", and aesthetic practice as a means to question rational thought is magnified in Spain throughout the twentieth century. Failure, anxiety and incapacity become a theoretical project for Spanish letters.

In 1964, Martín-Santos wrote *Libertad, temporalidad y transferencia en el psicoanálisis existencial*, a response-in-kind to the writings of Jean-Paul Sartre on phenomenology and the existential. Unamuno's concern that "España sigue enferma" (Gómez 2011, 147), becomes, under Martín-Santos' psychiatrist gaze, an analysis of this compelling but indefinite illness. Spain is now suffering at the hands of those who control, and who have tried to cure Spain in different ways and on different levels. Like Unamuno, Martín-Santos shifted his gaze from philosophical-psychiatric writings to aesthetic practice, as in *Tiempo de silencio*. The two writers, separated by time, are anxious to find the right way to treat text. As I have suggested, this not only recalls Longhurst's homage to the past, but also signals existential theory taking the text as its test site. This provokes a rebuttal of diagnosis as a means to cure, echoing R. D. Laing's antipsychiatry in an attempt to propose a

different hierarchy of analysis. This analysis, informed by earlier diagnoses, continues to expound the sprawling incapacity of science in a positivist reading.

4. Treatment

Luis Martín-Santos was a psychiatrist by education. In 1951, he was the director of the psychiatric hospital in San Sebastián, from where he published various works on psychiatry (González de Pablo 1998, 79-120). It is as a novelist, however, that Martín-Santos is more widely known, especially for *Tiempo de silencio* (1962), the only novel he published in his lifetime; the story of Pedro, a *madrileño* medical scientist who is investigating cancer in mice. A further unfinished novel, *Tiempo de destrucción* (1975), was published after Martín-Santos' death in a car accident. His friend Juan Benet was a civil engineer who published his first novel in 1961. Benet's *Volverás a Región* (1967) documents the relationship between a doctor (Sebastián) and a patient called María Timoner. In these novels, both Benet and Martín-Santos offer ways into reading Spain's ontological insecurity. In *Tiempo de silencio* Pedro's mice, sent for from the United States by a character called Muecas, die faster than they can reproduce. Interpolated into this narrative is the story of Muecas' daughter Florita, who dies from a botched abortion, a crime for which Pedro is momentarily and mistakenly imprisoned, and for which he loses his research grant. Florita's ex-partner, in revenge for Florita's death, kills Pedro's fiancée Dorita, and Pedro leaves Madrid, jobless and alone. The failed, or failing, anti-hero Pedro frequents, as the author did, literary cafés; his is a life where the literary and scientific collide. There seems to be something theoretically definitive in the failure of Pedro (Labanyi 1985; Pérez-Magallon 1994). Jo Labanyi suggests that the doctor "fracasa porque, en realidad, su proyecto no es un auténtico proyecto inconformista" (1985, 48). Her reading of the inferiority complex inherent in the Spanish psyche is coupled with a psychoanalytical reading of the text that underlines "la dependencia mutua entre el poderoso y el impotente" (1985, 101). Labanyi hits on the very anxiety that the antipsychiatric aesthetic addresses; but deals with the *fact* of failure, not the sensuous, alarming reality of it. One must acknowledge "la contradicción entre teoría y práctica" (1985, 115) that Labanyi notes as Pedro's downfall, but the result, always closing in on itself, is never as persuasive as the contradiction itself. Labanyi's Martín-Santos accuses Spain of submission to Franco's authority; here, too, could be a reader who responds submissively to the text and misconstrues its meaning (Labanyi 1985, 116). The author's analysis of Spain is also an observation of Spain's submission to orthodox psychiatry. But perhaps Martín-Santos is not only condemning or rejecting Spain's submission to its masters, if he is at all. Rather, as an antipsychiatric writer, he observes this contradiction with its vivid, anxious qualities and hears it speak with the voice of madness; he releases it as theoretical possibility into poetry. A voice is then given to the experience of submission to the "masters of madness", through a dialogue between Martín Santos and text, reader and text. This, in turn, is analogous to Laing's practice with his patients. Labanyi is not the last to offer a psychoanalytical reading of Martín-Santos' novel. More recently, Laura Sáenz has taken into account the "psicoanálisis existencial" of the author, in which the author "analiza la cosificación del pueblo español en pos de un proyecto ajeno" (2014, 262). Aesthetic

antipsychiatry is a humanist project; this, indeed, could be the external project that Martín-Santos sought, removed from the hard shell of dictatorship but offering something that moved beyond, to a wider sense of controlling dictums – dictums that cut to the core of being. In his earlier writings on psychiatry practices, the author “considera el establecimiento de un nuevo proyecto, del ‘neoproyecto’, como la ruptura del rígido caparazón que imposibilita la libertad del neurótico y le permite un nuevo posicionamiento en su vida” (González de Pablo 1998, 100), and it is precisely this new project – mirroring the counterintuitive ontological claims of the antipsychiatrists - that he wove into this novel.

In *Tiempo de silencio*, the language of madness, of “incapacity”, manifests itself in various ways. The author fills the text with neologisms,ⁱⁱⁱ as Joyce and Kafka had before him; some of these read like the unintelligible words that Laing had recorded in his sessions, and offer sense outside the limits of language imposed by reason. This experience is specifically Spanish: “se agita y se descubre allí algo que nunca vieron ojos no ibéricos” (Martín-Santos 1961, 8). In this “época crítica” (25), as Martín-Santos terms it, analysis of the madness of Spain, observed from outside its *rígido caparazón* of authoritative reason, is indeed all about the observation itself. This becomes clear when the failure of Pedro’s experiment does not amount to the failure of the novel, but to the total reorganization of it. This returns us to Fernando Morán’s “incapacidad ibérica” (Longhurst 2006, 279), which looks like failure but subsequently spills outside of normative limitations. Thus, on another level, the text itself becomes a kind of psychiatry, a shift that foregrounds the tension between art and science. In an ironic passage, Joycean and poetic in its lyrical vitality, and neurotic in its incessant list-making, Martín-Santos reflects on science: “Que la ciencia más que ninguna de las otras actividades de la humanidad ha modificado la vida del hombre sobre la tierra es tenido por verdad indubitable” (1961, 245), it begins. What follows, typical of the author’s style, is a *crescendo* of ironic statements that through their studied hyperactivity offer a dialogue with science, and, by extension, psychiatry. The extravagant style slips constantly between its ostensibly scientific narrative and the rush and extension of language. At the same time, the reader experiences - in poetry - the anxiety of and desire for submission that makes its presence felt in Freudian, Jungian, Lacanian theory – and on: “¡Qué refringencia de un aire inverosímil difracta las distancias y hace próximo el ensueño, la alucinación mescalínica!” (Martín-Santos 1961, 261). The mescaline tinge we find in his novel, refracting great distances of thought beyond the *racionalismo mórbido* wherein his characters remain trapped, offer doors of perception that were very much part of a wider zeitgeist. This hallucinatory quality is a poetic re-enactment of the contradiction between theory and practice. In practice, Labanyi’s critique of a submissive dependence on authority becomes, rather, an observation of how one critique forecloses on another; submission as a reaction to authority can itself be allowed room to breathe, take hallucinatory flight – “¡Que refringencia!” (Martín-Santos 1961, 261). By newly positioning the text, to use Martín-Santos’ own words, the author can wrestle with the contradiction of the discursive text’s insidious desire for silence.

In *Volverás a Región*, Doctor Sebastián offers treatment to a visiting traveller, María Timoner. The entire novel is a protracted communication between the two which does not resemble a medical diagnostic between doctor and patient. The text is awash with internal and external dialogue that seeps between the two characters, often confusing the reader by questioning the validity of a dualist relationship – as it exists, for example, in orthodox

psychiatry. Benet's texts have been described as "nutrida[s] de las grandes corrientes irracionalistas del siglo XX" (Carrera Garrido 2014, 237). Scholarship has taken up Benet's text as an existential communication whose silence is recognised as "el elemento fundamental para comunicar la experiencia" (Benson 2004, 377). Here, "lo que no puede decirse" (377) is the focus of Benet's text. This structuralist appreciation of enigmatic textual silence, though, has no time for the restorative humanity of antipsychiatry: "el discurso bentiano parodia todo intento de paliar el sufrimiento" (378). However, rather than revel in mystery and enigma as Benson's reading of Benet so successfully does, this article views enigma as a necessary aspect of counterintuitive theoretical practice. Could Benson's authoritative Benet, whose text produces a mysterious communication that resembles "el vacío" (376), in fact be listening rather than purporting to be speaking? Could this be a humanist text as opposed to "nihilista en cuanto a las posibilidades de adquirir conocimiento"? (372). Benet's novel takes place in a "non-place", Región, which however resembles "somewhere in northwest Spain between León and Asturias" (Herzberger 1976, 44). In his 1966 theoretical work *Inspiración y el estilo*, Benet takes a stance against reason as Martín-Santos had in *Tiempo de silencio*. Indeed, Benet adopts a "firmly anti-rationalist" approach to writing (Herzberger 1976, 25), something that is reflected multiple times in *Volverás*. Early on in the novel, the "patient" María offers her definition of reason that is doubly compelling; firstly, because she is not traditionally the authoritative figure; and secondly, because she is a mouthpiece for Benet's stance against reason and *racionalismo mórbido*: "lo que llaman ustedes la parte cuerda, todo lo contrario de lo que yo entiendo por eso" (Benet 1967, 113). Benet's novel creates the atmosphere of an analyst's room; there is "una brisa de olor medicinal" (24) in Región; but the relationship between doctor and patient is consistently compared and reversed - Doctor Sebastián "apenas abandonaba aquella habitación" (102) as if he is himself relegated to a *manicomio*, or a ward, whereas María is mobile, capable of choice. She arrives by car, an arrival that the Doctor experiences as an oscillation between past and present, until María "apareció junto a él" (101). It is the Doctor, indeed, who experiences ontological insecurity: time is both present and past for him; nothing seems alive, real or whole. R. D. Laing had a very specific view of the relationship between doctor and patient in critical psychiatric terms. Laing hoped for a reciprocal relationship between analyst and analysand; this way, the psychiatric dimension of psychosis, silenced by rational thought, might leak through and be observed. Laing's "politics of experience" resembles Benet's reading of the rational, although Benet replaces Laing's discursive format with a poetic one: "la edad de la razón y la lucidez no es más que una supervivencia" (1967, 109). This instinct for survival, in which we inveigle ourselves in "rational" experience, is viewed extremely negatively by both Laing and Benet; it is the kind of submission to power that Foucault attributed to the victims of the masters of madness. For Benet, then, poetry offers a space for the doctor and patient to act out something to akin to Laing's antipsychiatric experience. Instead of a political structure that affected a cure, Laing sought a humanist approach that aimed to take into account social context, used as a means to contribute to the patient's wellbeing. This shared experience attempted, at least, to replace the managerial focus of orthodox psychiatry with an experience that, as Martín-Santos suggested, "le permite un nuevo posicionamiento en su vida" (González de Pablo 1998, 100). Benet, like Laing, questions the very idea of a cure, but it is María, the patient of the imprisoned Doctor Sebastián, who voices it: "¿La curación? ¿La

curación de los demás? ¿Cómo es eso?” (Benet 1967, 103). The use of the interrogative particle “cómo” focuses on mode and process, rather than type; this mode of questioning encourages an indefinite response, one that does not define but encourages hermeneutic exploration. As a Doctor, he does not offer a cure; he observes – “la observó” (111) – and it is in this mode that Spain’s unresolved, but not undiagnosed, past can best be analysed, and not shut away. As the Doctor muses in this deeply philosophical novel, “pienso a veces que la única nota positiva que hay en mi carácter radica en mi falta de resolución” (109). What abides deep within the novel is an observing spirit, one that is not subject to interpretative rational thought but is certainly open to exploration of failure, anxiety and incapacity.

5. Submission

In Martín Santos and Benet’s work, the *cure-as-treatment* expounded by the Foucaultian medical personage comes up against the counterintuitive qualities of antipsychiatric treatment. Film director Víctor Erice offers a further sensation of the potential of ontological insecurity. His film *El espíritu de la colmena* (1973) is a haunting, hallucinatory film that chronicles the disintegrating relationships in a family who live in an isolated Castilian village. In a definition seemingly lifted directly from Cervantes, but also Unamuno’s 1899 article in journal *La Estafeta*, Erice introduces the viewer to “la meseta castellana” as a cinematic space of large swathes of blank sky and wilderness; “estas desoladas mesetas” (1899), as Unamuno had called them seventy years previously. The viewer has come to observe the villagers watch a screening of James Whale’s *Frankenstein* (1931). As E. C. Riley suggests in his important early article on the film, Erice’s gaze is “unobtrusive” (1984, 492). Riley’s reading of the film ends at the point where an antipsychiatric reading of the film should begin. Riley concludes that “Víctor Erice turns Ana’s story inside out, which is, in a sense, what any psychoanalyst does with his subject’s experiences. But it is a rare psychoanalyst who manages to be poet and artist as well” (496). Riley’s significant article does not offer, as later work on the film does, a vision of Erice’s film through the psychoanalyst’s lens (Egea 2002; Russell 2007), nor through a critical framework such as Labanyi’s post-Derridean “hauntological” reading (2002). Crucially Riley hints at something beyond a psychoanalytical framework, which has something to do with the doctor-patient dialectic, is not orthodox, and exists somewhere between art and science. Taking up Riley’s open conclusion, I suggest that the film pulsates with the concerns of the antipsychiatric aesthetic: failure stares all of the protagonists in the face; anxiety consumes them; and incapacity – even entrapment – is a predominant sensation. Riley’s positioning of Erice himself as a kind of psychiatric authority plays with our idea of who the doctor might be, or how he might behave. The cinematic gaze amplifies the tension of this experience because Erice’s directorial intervention feels minimal, even imbalanced. The insect-like luminosity of Ana and her sister as they appear and disappear across the relentless landscape in their failed search for the monster is, for the viewer, a kind of madness. The film offers three strands that mine the same kind of counterintuition present in the novels discussed earlier: firstly, the “intensely reflexive” existential narrative (Ros 1995, 123); second, its preoccupation with physical representations of the mind; and finally, a focus on silence as a sense of communion that prioritises listening over speaking – and by extension, over telling.

The doctor-patient dynamic is an overwhelming metaphor. Dr. Frankenstein and his monster have often been the focus of scholarship on the film; both Juan Egea (2002) and Dominique Russell (2007) offer powerful readings of this metaphor and its theoretical import. Furthermore, Unamuno appears as a symbolic figure, denoting his wider gravitas as a philosopher committed to the diagnosis of the Spanish psyche. Erice links the character of Ana's father, Fernando, to Unamuno - they appear together in a photograph as younger men. Here we can intuit that this past "Fernando", a young Republican intellectual whose nation's past is intrinsically linked to Unamuno's thinking, has no place in the empty *meseta castellana* under Franco. The image is striking. Unamuno becomes a symbolic relative whose ambiguity – incapacity – manifests itself in the filmic text; he is represented in a visual text (photograph) within a visual text (film). This intertextual presence multiplies binaries as if in a room of mirrors: the relationship between doctor and patient is further complicated. This knotty kind of subjectivity recalls Laing's book from three years earlier (*Knots*, 1970). The subject and object of analysis is conflated, convoluted, confused: who is the doctor; who is the patient? The viewer is presented with multiple possibilities; perhaps then we are the doctor? It is not clear. This Laingian notion instigates a profound sensation of control unravelling. At the same time, the presence of Fernando and Unamuno together in a photograph suggests that the image has been manipulated: who is the author of this hallucination of the past, superimposed on photographic paper? Erice, like his antipsychiatric counterparts, understands the value of blurring the authority of his own discourse, and recognises aesthetic representation as a salient test ground for this. This photographic imprint re-enacts the simultaneous unravelling and asserting of authority, and directs a powerful but undefined sense of ambiguity towards the historical figure of Unamuno. His artificial apparition alongside Fernando foregrounds the function and process of film-making - and in turn, authorship and authority. The manifestation of an author-doctor in this metafictional way is curious, and characterises the reciprocal process that occurs between text (doctor) and reader (patient) in the antipsychiatric aesthetic. The film is permeated with and attracts a sense of medical observation, and an affinity appears between Erice's Unamuno and the Unamuno that inspired Martín-Santos; the Unamuno whose existential philosophy laid the groundwork for Martín-Santos' "neoproyecto". Yet the ambiguity of Unamuno as a hallucinatory authoritative voice from the past is part of that process of permeation and attraction too.

In this film, what happens out of shot can have just as serious repercussions as what happens within the already ambiguous frame of the camera lens. What kind of anxiety is the viewer submitted to, as troubled questions leave our sphere of control? We do not know what happens to Ana when she meets the monster. What metaphorical or psychoanalytical framework can we place this in? In this sense, Erice's film is, as Riley suggests, full of "incompleteness of information" (496) and is as much about the anxieties of incompleteness and failure for the viewer as it is for the characters in the film and even the film's director. Ana's ethereal meeting with the monster is a process of looking, touching and shared physicality. She does not shut the monster out. However, something monstrous remains there to be observed, or listened to: a silent intervention. The dénouement of her meeting with the monster is off-screen, and it is rather the process of interaction that interests Erice, as it did Laing. This failure to foreclose is in contrast to Ana's treatment by a doctor at the end of the

film. The doctor answers Ana's concerned mother by telling her that Ana is "bajo los efectos de una impresión muy fuerte", and that her ordeal is over: "que vive, que vive". This existential diagnosis offers clues to the antipsychiatric aesthetic: as Ana's trauma is "turned inside out" (Riley 1984, 496) we may be witness to the *enfermedad crónica* that Benet recognised as imprinted on Spain's psychological history. Spain's incapacity for science does not have a claim on Ana's subjectivity; indeed, this incurable disease is part of existence itself, and thus bypasses the presupposition that a cure is necessary. A cure may be undesirable - and Spain's curative incapacity hints at its own emancipation. As the doctor takes leave of Ana, she turns to the window - and to the viewer - and opens the window out onto the screen itself mouthing "soy Ana". As Riley began to suggest, a turn to art and its irrational logic takes us beyond the claims of science. What Riley leaves us with, through the words of Erice, is a diagnosis of Ana that is by no means conclusive: "si algo la caracteriza, es una suerte de misterio; algo que a nosotros, espectadores al fin y al cabo, quizás sin remedio se nos escapa" (496). The literal subtext of "sin remedio" echoes the concerns of the fictional character of María Timoner in Benet's novel: "¿La curación de los demás? ¿Cómo es eso?" (1967, 103). Implicit in Ana's eerie emancipation is the potential of ontological insecurity to behave like a series of illogical questions that consistently escape us; we are destined to think otherwise.

The mind as a physical entity - a site of exploration - is a repeated leitmotif in the film. The title famously alludes to this; the hive of Fernando's study with glowing honeycomb windows; the hive of the village, with tiny figures of children recorded in stop-motion; the hive as *manicomio*; the "hive-mind" as a psychological approximation of the collective conscious. These metaphorical references flesh out what Fernando hears at the beginning of the film, the distant dubbing of Whale's *Frankenstein* and his "cerebro perfecto". This focus centres on aesthetic representations of what a psychiatric framework attempts to contain. Yet the cinematic gaze opens up multi-dimensional visualisations of these discursive attempts to model the same. These visualisations in turn suggest or question what is outside the capacity of the mind, a process which overhauls our usual mode of seeing. Could this be a cinematic expression of what R. D. Laing called an "insistent experience of other dimensions"? (1961, 11) This experience does, as I have shown, have a claim on the senses. Vision and listening, both essential factors in the cinematic process, move away from orthodox ways of treating Spain's *enfermedad crónica*. Erice's film has often been discussed in terms of the lacunae, absences and silences that characterise its narrative and technique. Xon de Ros, especially, has mined its audiovisual content in terms of its European counterparts. But the sound of "existential isolation" (2006) - that for Julian Paul Smith permeates the film - also prioritises listening over speaking. The viewer is encouraged to immerse herself in an audible landscape of presences and absences that echoes the role of the doctor in an antipsychiatric session. The lack of dialogue shares similarities with the dissolution of dialectical thought that has been mentioned in Benet's *Volverás a Región*. Silence need not mean enigma, lack of sound or communication; rather, the act of listening is contiguous with the act of observation.

6. Conclusion

The ontological insecurity that antipsychiatry aimed to analyse through practice permeates Spanish literature and film of the 1960s and 1970s. Common amongst this trio of artists is their shared counterintuitive concerns, which are similar to those of antipsychiatry. The prevalence of a doctor-patient dialectic in these works foregrounds an ideological illness, which as we have seen belongs to a longer history of something similar and equally hard to define. The manner in which the works I have discussed here dissolve and stretch our notion of common consent is vital. The antipsychiatric aesthetic offers an ontological mobility that orthodox psychiatry, and even antipsychiatry in practice, cannot. That Spain was transfixed by an ideological juggernaut, engaged in something like Foucault's theory of punishment and reward, few would question. That authors and filmmakers could offer an aesthetic way to question this suggests that perhaps Spain, intellectually at least, was able to re-create existential emancipation beyond binary opposition; but only because it did not, for various reasons already outlined here, feel constrained to discursive text. The family resemblance present in literature and film of this period seems, instead, to pick apart the dialectic of orthodox theory through visualisation - even hallucination. This re-enactment in text and film has a radical component. In this formulation of an antipsychiatric aesthetic, Spain's failure - its 'incapacity' - to formulate its own science analogous with other European movements opens up a position beyond orthodoxy, normativity and rationalisation. By articulating a family resemblance at this time, these texts reveal a specifically Spanish strain of thought that is undiminished by dictatorial control; indeed control forms part of its understanding of being. This aesthetic develops in a notably Iberian manner and fails to adhere to the same mode as its European contemporaries. The shift of focus on mode in Spanish letters, and its palpably medical metaphorical leitmotif, is crucial in this reading of late dictatorship Spanish art. Whilst Laing returned to the literary text to inform his readings of ontology, the Spanish antipsychiatric aesthetic remained within the body of the text or captured within the celluloid of cinema. This aesthetic serves to offer, and elicit, a reading of culture that is not subject to the same restrictions imposed upon the physical reality of antipsychiatric practice as experienced by Laing and Basaglia. International antipsychiatry was never the radical movement that Laing and Basaglia intended, despite its successes in Italy (Foot 2014). The anxiety of the submission-control dialectic overflows within the literary body, and creates new pathways of reception that challenge the dialectic itself. Antipsychiatry in practice cannot, it would seem, break the dichotomous relationship between patient and doctor. If this relationship is, as Foucault and Laing suggest, indicative of our subjective experience, then both science and art are condemned to experience an eternally returning cycle of authority. However, by re-enacting this process, the antipsychiatric aesthetic which predominated in Spain offered an alternative - because there was no such relationship. The reader-writer/text-reader relationship replaced it, and held within this knottiness was a humanist project - "el neoproyecto". This project loosens the grip discursive theory has on its subject by refusing to shut out ontological anxiety as it is silenced or submitted to control. By exploring the compelling intervention of the antipsychiatric aesthetic, Spain is placed at the forefront of radical critical theory.

Notes

- i) John Foot's monograph, *Repubblica dei Matti: Franco Basaglia e la psichiatria radicale in Italia, 1961 – 1978* (2014) offers a comprehensive overview of the critical psychiatry movement, and explains that although this disparate movement is often labelled “antipsychiatric”, the term itself was rejected by Szasz, Laing, even Cooper himself.
- ii) Psychiatrist Manuel Desviat and the journal he founded, *Atopos*, are invaluable starting points in the under-researched field of practical Spanish critical psychiatry.
- iii) A fascinating reference here is J.L.S Granda's *Glosario de Tiempo de silencio* de Martín-Santos (1987, 1-7).

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